



Commissioner for Patents  
Washington, DC 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 1366

<b>SERIAL NUMBER</b> 09/439,187	<b>FILING DATE</b> 11/12/1999 <b>RULE</b>	<b>CLASS</b> XXX	<b>GROUP ART UNIT</b> 2681	<b>ATTORNEY DOCKET NO.</b> 781.316USW1
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**APPLICANTS**

JUKKA WALLENIOUS, HELSIINKI, FINLAND;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CON of PCT/FI99/00205 03/17/1999

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

FINLAND 980588 03/17/1998

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\*.12/21/1999

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> FINLAND	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 14	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

**ADDRESS**

32294

**TITLE**

CONFIGURATION OF INTELLIGENT NETWORK SERVICE

<b>FILING FEE RECEIVED</b> 760	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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SERIAL NUMBER 09/439,187	FILING DATE 11/12/99	CLASS 379	GROUP ART UNIT 2742	ATTORNEY DOCKET NO. 781.316USW1
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APPLICANT

JUKKA WALLENIOUS, HELSIINKI, FINLAND.

  
  

**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\***  
VERIFIED                      THIS APPLN IS A CON OF PCT/FI99/00205 03/17/99

  
  

**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\***  
VERIFIED                     

  
  
  
  
  
  
  
  
  
  

**\*\*FOREIGN APPLICATIONS\*\*\*\*\***  
VERIFIED                      FINLAND 980588 03/17/98

  
  
  
  
  
  
  
  
  
  

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 12/21/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY FIX	SHEETS DRAWING 2	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 3
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Verified and Acknowledged                                            
Examiner's Initials Initials

  

ADDRESS

ALTERA LAW GROUP  
10749 BREN ROAD EAST  
MINNEAPOLIS MN 55343

  

TITLE

CONFIGURATION OF INTELLIGENT NETWORK SERVICE

  

FILING FEE RECEIVED  \$760	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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